



## FACSIMILE COVER SHEET

**DATE:** April 4, 2005

**TO:** Examiner James M. Hewitt      **FAX NO.:** 703-872-9306  
USPTO GPAU 3679

**FROM:** Jeffrey S. Abel  
Reg. No.: 36,079

**RE U.S. App. No.:** 10/785,549, filed February 24, 2004

**Applicant(s):** Stephen Ronald Warburton-Pitt, et al.

**Atty Dkt No.:** 1035-ON3843-D2

**Title:** TUBING AND CONNECTOR ASSEMBLY

**NO. OF PAGES (including Cover Sheet):** 16

### MESSAGE:

Attached please find:

- Transmittal Form (1 pg)
- Fee Transmittal (1 pg)
- Extension of Time (One-Month, 1 pg)
- Response to Office Action (7 pgs)
- Information Disclosure Statement (3 pgs)
- Form PTO-1449 (2 pgs)

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PTO/SB/21 (09-04)

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FORM**

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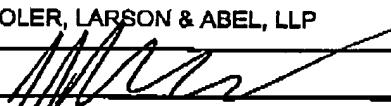
15

Application Number	10/785,549
Filing Date	February 24, 2004
First Named Inventor	Stephen Ronald Warburton-Pitt
Art Unit	3679
Examiner Name	James M. Hewitt
Attorney Docket Number	1035-ON3843-D2

**ENCLOSURES (Check all that apply)**

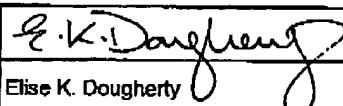
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Form PTO-1449 (2 pgs)</b>
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	Remarks
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement (including 4 non-US references) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<b>CUSTOMER NO.: 34456</b>	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	TOLER, LARSON & ABEL, LLP		
Signature			
Printed name	Jeffrey S. Abel		
Date	/ / /	Reg. No.	36,079

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name	Elise K. Dougherty
Date	4/4/05

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*Effective on 10/01/2004. Patent fees are subject to annual revision.***FEE TRANSMITTAL**  
**For FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 300.00)**Complete if Known**

Application Number	10/785,549
Filing Date	February 24, 2004
First Named Inventor	Stephen Ronald Warburton-Pitt
Examiner Name	James M. Hewitt
Art Unit	3679
Attorney Docket No.	1035-ON3843-D2

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order
<input checked="" type="checkbox"/> Deposit Account	<input type="checkbox"/> None	
Deposit Account Number	50-2469	
Deposit Account Name	TOLER, LARSON & ABEL, LLP	

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**FEE CALCULATION** (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

Multiple Dependent Claims      Fee (\$)      Fee Paid (\$)

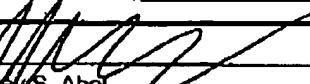
Subtotal (2) \$ 0.00

**3. OTHER FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
1-month extension of time	120	60	120.00
2-month extension of time	430	215	_____
3-month extension of time	980	490	_____
4-month extension of time	1,530	765	_____
5-month extension of time	2,080	1,040	180.00
Information disclosure Stmt. fee	180	180	180.00
37 CFR 1.17(q) processing fee	50	50	_____
Non-English specification	130	130	_____
Notice of Appeal	340	170	_____
Filing a brief in support of appeal	340	170	_____
Request for oral hearing	300	150	_____
Other: _____			

Subtotal (3) \$ 300.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,079	Telephone 512-327-5515
Name (Print/Type)	Jeffrey S. Abel	Date 5/2/05	

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